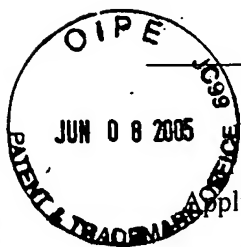


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REQUEST FOR CONTINUED EXAMINATION

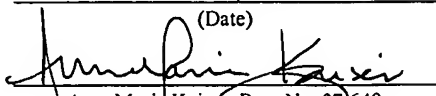
Applicant : Goddard, et al.
App. No : 10/063,599
Filed : May 3, 2002
For : SECRETED AND TRANSMEMBRANE
POLYPEPTIDES AND NUCLEIC ACIDS
ENCODING THE SAME
Examiner : Sandra L. Wegert
Art Unit : 1647

CERTIFICATE OF MAILING

I hereby certify that this correspondence and all marked attachments are being deposited with the United States Postal Service as first-class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on

June 6, 2005

(Date)


AnneMarie Kaiser, Reg. No. 37649

Mail Stop RCE

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

This Request for Continued Examination (RCE) is being made as follows:

1. Submission Required under 37 CFR 1.114:

- (X) Enclosed:
 - (X) Amendment/Reply in 24 pages.
 - (X) Exhibits 1 - 6.
 - (X) Information Disclosure Statement (IDS).
 - (X) PTO/SB/08 Equivalent listing 38 references (25 enclosed).
 - (X) Return Postcard.

06/08/2005 MBLAND 00000006 10063599

02 FC:1251

120.00 DP

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2. Fees:

FEE CALCULATION				
FEE TYPE		FEE CODE	CALCULATION	TOTAL
RCE Fee		1801 (\$790)		\$790
Suspension of Action		1463 (\$130)		\$0
Total Claims	6 - 20 = 0	1202 (\$50)	0 x 50 =	\$0
Independent Claims	1 - 3 = 0	1201 (\$200)	0 x 200 =	\$0
Multiple Claim		1203 (\$360)		\$0
1 Month Extension		1251 (\$120)		\$120
2 Month Extension		1252 (\$450)		\$0
3 Month Extension		1253 (\$1,020)		\$
			TOTAL FEE DUE	\$910

(X) An extension of time is hereby requested by payment of the appropriate fee indicated above.

3. Payment:

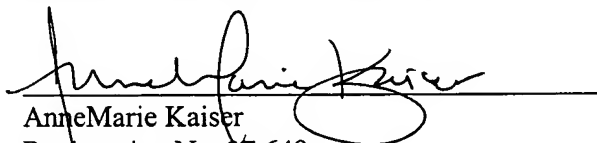
(X) Check in the amount of \$910 to cover the above fees.

Please charge any additional fees, including any fees for additional extension of time, or credit overpayment to Deposit Account No. 11-1410.

4. Other Enclosures:

(X) Return Postcard.

Respectfully submitted,
KNOBBE MARTENS OLSON & BEAR LLP


AnneMarie Kaiser
Registration No. 37,649
Attorney of Record
Customer No. 30,313
(619) 235-8550

Dated: June 6, 2005